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## PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. 1.136(a)

Docket Number (Optional)

320208001US1

In re Application of  
Graham D. MarshallApplication Number  
09/771,314Filed  
January 26, 2001For  
APPARATUS AND METHOD FOR AUTOMATED MEDICAL  
DIAGNOSTIC TESTSGroup Art Unit  
1743Examiner  
Brian R. Gordon

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |          |
|--|----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$ 110   |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$ 420   |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ 950   |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$ 1,480 |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$ 2,010 |

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: **\$475.00**.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 50-0665.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration number 37,263.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

January 8, 2004

Date

(206) 359-8000

Telephone Number

Signature

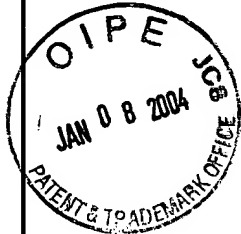
Robert G. Woolston

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms is submitted.

This form is estimated to take 6 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**



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